

CLAIMS ONLY

Application Number

10-501143

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1			1			
2						
3			2			
4			2			
5			2			
6			2			
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Total Indep			1			
Total Depend			22			
Total Claims			23			

	Indep	Depend	Indep	Depend	Indep	Depend
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